DONELAN, CLEARY, WOOD & MASER, P.C. EX PARTE OR LATE FILED

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August 8, 1997

Secretary
Federal Communications Commission
Washington, D.C. 20554

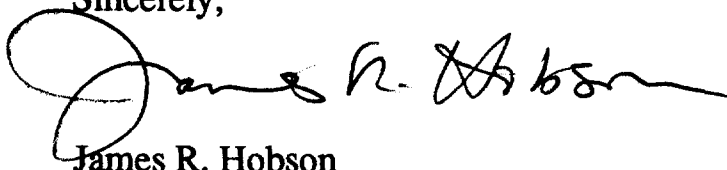Re: CC Docket No. 94-102, ex parte submission

Dear Mr. Secretary:

The National Emergency Number Association ("NENA"), pursuant to Section 1.1206 of the Rules, submits for the record in the captioned proceeding information about how carriers subject to the wireless 9-1-1 compatibility rules at 47 CFR §20.18 may identify Public Safety Answering Points ("PSAPs") associated with their service areas.

The attached material from NENA describes three distinctive files available under the terms specified in the appended order forms for each: PSAP List, PSAP Survey, and PSAP Boundary File. As can be seen from the "PSAP Database Product Description," the first and third of these files are particularly pertinent to carriers coming into compliance with Section 20.18.

Please direct any questions to the undersigned.

Sincerely,

James R. Hobson

cc: John Cimko, Wireless Telecommunications Bureau

NENA PSAP DATABASE PRODUCT DESCRIPTION

NENA's PSAP database now includes nearly 4,000 9-1-1 Centers across the country[1], including Alaska and Hawaii. The Fields that are contained in the NENA PSAP List database, are as follows[2]:

Field Name	Data Type	Description
ID	Number	Unique Identifier
AGENCY	Text	PSAP's Agency Name
COVG_AREA	Text	PSAP's Coverage Area
ADMN_PHONE	Text	Administrative Phone Number
MAIL_ADDR	Text	Mailing Address (i.e. P.O. Box)
STRT_ADDR	Text	Address of the PSAP site
CITY	Text	PSAP's City
STATE	Text	PSAP's State
ZIP_MAIL	Text	Mailing Zip Code
ZIP_SITE	Text	Site Zip Code (if different than Mailing Zip Code)
ZIP_PLUS4	Text	Extended Zip+4 for Site
COUNTYNAME	Text	Name of County that PSAP is in
FIRST_NAME	Text	First Name of Contact
LAST_NAME	Text	Last Name of Contact
FAX_PHONE	Text	Fax Line
TEN_DIGIT1	Text	10-Digit Emergency Number[3]
TEN_DIGIT2	Text	10-Digit Emergency Number (only if non-transferable lines)

The PSAP Survey includes answers to questions on the sample Survey not reflected above. This is the only product with the Survey information

The PSAP List Boundary File is a MapInfo based file reflecting the jurisdictional call taking boundaries for PSAP's. This is based on interaction with each PSAP and selection of specific related boundaries i.e. MCD's. This is a much more accurate method than using telephone exchanges. The PSAP List Boundary File also contains latitude and longitude coordinates, for each PSAP, taken to a street address level of accuracy (90%) or a zip+4 accuracy level (10%). A *Georesult* column is provided that will tell you the level of accuracy for each individual record.

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[1]The number of PSAP's is always changing as new areas of the country acquire 9-1-1 service and other areas consolidate or adapt their 9-1-1 service in response to changing demographics, and local policies. NENA's PSAP database is constantly being updated and can be sent to subscribers on a quarterly basis.

[2]The above table is also the code book for the PSAP List. It can be used for importing ascii text files and reflect the order and type of fields in the database.

[3]The Ten Digit Emergency Number is a number that rings to the same console as does 9-1-1 (an alternate path into the system). This does not mean that it is a 9-1-1 trunk line. Also some PSAP's now provide separate 10-Digit emergency numbers for cellular callers. Those numbers may be a different number than the one provided in the PSAP List. Users are encouraged to verify the correct number for their specific need.

Current Information on File:

Agency

Person

Address 1

Address 2

City, State, Zip

County

Phone

Fax

Secondary to

Jurisdiction

Corrected Information:

Agency _____

Person _____

Address 1 _____

Address 2 _____

City, State, Zip _____

County _____

Phone (   ) _____

Fax (   ) _____

Secondary to _____

Jurisdiction _____

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR NENA's DATA BASE

PSAP type?   ☐ primary   ☐ secondary

Name of your County Seat?_____

Type of 9-1-1?
    ☐ Basic   ☐ ANI only   ☐ ANI/ALI   ☐ Selective Routing

Do you have:
Computer-Aided Dispatch (CAD)?   ☐ Yes   ☐ No
Automatic Vehicle Location (AVL)?   ☐ Yes   ☐ No
Geographic Information Systems (GIS)?   ☐ Yes   ☐ No
Record Management Systems (RMS)?   ☐ Yes   ☐ No

Who was your 9-1-1 Terminal Vendor?

_____

What type of 9-1-1 system do you have?
    ☐ Stand alone   ☐ Regionalized

Who is your serving telephone company? _____
_____

Number of incoming 9-1-1 trunks? _____

What is the approximate population of your area served? _____
_____

What is your back-up 10-digit emergency phone number?

    (   ) _____

Call takers: # Dispatchers:

Full time _____ Part time _____   Full time _____ Part time _____

How many non-telecommunicator staff in your communication center?

     Full time _____   Part time _____

How many call-taker workstations? _____

How many dispatch positions? _____

How many hours of telecommunicator training are required?
    Initial _____   Annual in-service _____

How many 9-1-1 calls do you currently have per month?
    Wireline _____   Non wireline(cellular)_____

What is your average call length time for?
    Wireline _____   Non wireline(cellular)_____

What was the percentage of cellular calls in:
    1992_____   1993_____   1994_____

RETURN TO: NENA
                1560 Fishinger Road, Suite C
                Columbus, Ohio 43221
                (614)459-7707

or FAX TO: (614)459-7709 (*Fax Only*)

PSAP LIST ORDER FORM

Name _____

Organization _____

Address _____

City _____ State _____ Zip _____

Please send me the NENA PSAP List for the following:

☐ Complete PSAP List for all states for _____ users (see multiplier table).

    ☐ Companies $4,000   ☐ Update Pkg[1] $3,500   (Yearly Renewal $3,500)
    ☐ Gov't Agency $2,500   ☐ Update Pkg[1] $2,000   (Yearly Renewal $2,000)

☐ Labels for entire U.S.   ☐ Labels for following States   Labels @ $0.20 per label

_____

_____

Please specify desired format:

    ☐ MS Access 7   ☐ MS Excel 3, 4, 5-7   ☐ MS FoxPro 2, 2.5, 2.6, 3
    ☐ Paradox 3, 4, 5   ☐ Ascii Text (fixed width)   ☐ Ascii Text (comma delimited)
    ☐ dBase III, IV, 5   ☐ Lotus (wk1, wk3)   ☐ ODBC Database

Multiplier Table:

For Up to X Users	Data Multiplier
1	1.0
10	3.5
20	4.2
50	5.5
70	7.5
100	9.0
Corporate Site License	12.0

A signed Agreement must accompany all orders.

Please send payment to: National Emergency Number Association
                          47849 Papermill Road
                          Coshocton, OH 43812-9729

You may Fax the PSAP Survey Order Form and Agreement to: (614) 622-2090

For additional information, please call the NENA National Office at 1-800-332-3911

_____

[1]The Update Package is a one time fee for which the Customer receives quarterly updates of the data the first year and for each yearly renewal of the license. Without the Update Package the Customer receives one copy of the data with no rights to subsequent quarterly updates. The only update the Customer will receive is with the yearly renewal of the license.

PSAP SURVEY ORDER FORM

Name _____

Organization _____

Address _____

City _____ State _____ Zip _____

Please send me the NENA Survey for the following:

☐ Complete survey for all states for _____ users (see multiplier table).

    ☐ Companies $5,000   ☐ Update Pkg[1] $4,500   (Yearly Renewal $4,500)
    ☐ Gov't Agency $3,000   ☐ Update Pkg[1] $2,500   (Yearly Renewal $2,500)

☐ Survey results for the following states (Call NENA for prices on custom orders):

_____

_____

Please specify desired format:

    ☐ MS Access 7   ☐ MS Excel 3, 4, 5-7   ☐ MS FoxPro 2, 2.5, 2.6, 3
    ☐ Paradox 3, 4, 5   ☐ Ascii Text (fixed width)   ☐ Ascii Text (comma delimited)
    ☐ dBase III, IV, 5   ☐ Lotus (wk1, wk3)   ☐ ODBC Database

Multiplier Table:	For Up to X Users	Data Multiplier
	1	1.0
	10	3.5
	20	4.2
	50	5.5
	70	7.5
	100	9.0
	Corporate Site License	12.0

A signed Agreement must accompany all orders.

Please send payment to: National Emergency Number Association
                           47849 Papermill Road
                           Coshocton, OH 43812-9729

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PSAP BOUNDARY FILE ORDER FORM

Name _____

Organization _____

Address _____

City _____ State _____ Zip _____

Please send me the following NENA PSAP Boundary File for _____ users (see multiplier table):

☐ CD-Rom of the PSAP List Boundaries.

    ☐ Price $10,000   ☐ Update Pkg[1] $9,000   (Yearly Renewal $9,000)

Multiplier Table:

For Up to X Users	Data Multiplier
1	1.0
10	3.5
20	4.2
50	5.5
70	7.5
100	9.0
Corporate Site License	12.0

A signed Agreement must accompany all orders.

Please send payment to: National Emergency Number Association
47849 Papermill Road
Coshocton, OH 43812-9729

You may Fax the PSAP Survey Order Form and Agreement to: (614) 622-2090

For additional information, please call the NENA National Office at 1-800-332-3911

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